

09/913990

ISSUE SLIP STAPLE AREA (for additional cross references:)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW	DK		10/12/01

## INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral)... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
Final Original	
1	12/11/03
2	✓
3	✓
4	✓
5	0 ✓
6	0 ✓
7	0 ✓
8	✓
9	✓
10	✓
11	0 ✓
12	0 ✓
13	0 N
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
staple additional sheet here